

Sample
Mark-to-Market
Form 2.9
List of Potential Assets

List of Potential Assets

PAE Name

As of Date

State	Field Office	Property Name	City	FHA Number	Sec 8 Contract Number	Contract Expiration Date	Request	Conflicts Form 2.2 Conflict?	Initial + Date	Capacity Initial + Date
State								Yes	No	
								Date:	Date:	

Total Properties:

PAE Name:

*Circle Yes if a Conflict is Identified in FORM 2.2 and No if No Conflict was identified by your organization at this time.

*Please have a PAE authorized representative initial next to the assets you can accept at this time and those you cannot accept due to your organization’s capacity. Those you reject may be assigned to another PAE.